

APPRENTICE ID# \_\_\_\_\_



STATE OF TENNESSEE  
DEPARTMENT OF COMMERCE & INSURANCE  
**AUCTIONEER COMMISSION**  
500 JAMES ROBERTSON PARKWAY  
NASHVILLE, TN 37243-1152  
Phone: (615) 741-3600 Fax: (615) 253-1179  
Fax or mail to above address  
**NO FEE - RETAIN COPY FOR YOUR FILES**

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**TEMPORARY APPRENTICE SPONSORSHIP AGREEMENT**

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Pursuant to Tennessee Code Annotated 62-19-111(q), the following parties desire to enter into an agreement whereby the Tennessee Apprentice Auctioneer identified in Block #1 of this form desires to be temporarily employed by the duly licensed Tennessee Auctioneer designated in Block #3 of this form. The following date and time of transfer shall apply to all signing this form:

Date and time Agreement Begins: Beginning Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date and time Agreement Ends: Ending Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Block #1**

**Apprentice Auctioneer**

The undersigned Apprentice Auctioneer desires to be employed by the Tennessee Licensed Auctioneer designated in Block #3 of this form for the time period shown at the top of this form.

Apprentice Auctioneer (Please print name): \_\_\_\_\_

License Number: \_\_\_\_\_

Signature of Apprentice Auctioneer: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Block #2**

**Sponsoring Auctioneer**

The undersigned sponsoring Auctioneer grants permission for the Apprentice Auctioneer designated in Block #1 to be employed by the employing auctioneer designated in Block #3, for the time and period shown at the top of this form. I understand that I must maintain a copy of this form in my files and make it available for review upon request.

Sponsoring Auctioneer (Please print name): \_\_\_\_\_

License Number: \_\_\_\_\_

Signature of Sponsoring Auctioneer: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Block #3**

**Employing Auctioneer**

The undersigned duly licensed Tennessee Auctioneer desires to employ the Apprentice Auctioneer designated in Block #1 of this form, and agrees to accept full responsibility for the actions of the Apprentice Auctioneer for the time period shown at the top of this form. I understand it is my responsibility to maintain a copy of this form in my files and make it available for review upon request.

Employing Auctioneer (Please print name): \_\_\_\_\_

License Number: \_\_\_\_\_

Signature of Employing Auctioneer: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_